Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

(Column 1) (Column 2)								SMALL ENTITY TYPE		0 D	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			Column	<u></u>	(Colu	11111 2)	ľ			OR I I		
					<u> </u>		.	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			minus 20=		• 5			X\$ 9=		OR	X\$18=	90
INDEPENDENT CLAIMS				nus 3 =	3			X40=		or	X80=	240
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	L	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER THAN	
		(Column 1)				(Column 3)		SMALL E	ENTITY	OR	SMALL I	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	T CL AINA	=		X40=		OR	X80=	
<u> </u>				\			1 [+135=		OR	+270=	
Best Available Copy								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
	,		NOUN. FEE	***************************************		ADDIT: I CC						
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREV	IMN 2) HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=] [X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
							l	+135=		OR	+270=	
								TÖTÄL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)	<u>.</u>					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	HEST MBER IOUSLY) FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=]	X40=			X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							740=		OR		
• Kills and the second state of the second sta								+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		ımber Previousiy F nber Previousiv Pa					er fou	nd in the ap	propriate bo	x in co	olumn 1.	